



ASC Utilization Report
State Form 49933 (R3/6-05)
Indiana State Department of Health
Acute Care

Status: Finalized

I. Center Identification

Organization Name: SOUTH BEND SPECIALTY SURGERY CENTER

Street Address: 335 Florence Ave., Suite 1B

City: Granger

County: St. Joseph

Administrator Name: Ralph Lantz

Administrator Email: rlantz@southbendspecialty.com

ASC Web Address:

Fiscal Year: 2017

Accredited: Yes No

Name of Accrediting Body: AAAHC

Deemed Status: Yes No

Corporate Tax Status: For Profit Non Profit

II. Identification of Surgical Resources

Number of operating rooms	2
Number of procedure rooms	2

III. Utilization Statistics

A. Total Patients and Procedures		
Time Period	Number of Patients	Number of Procedures
Persons Served in twelve-month period	791	2320
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
69436	294	
31231	247	
64721	142	
42820	141	
30930	98	
42830	98	
30520	62	

28285	47
42821	44
26055	30

IV. Outcomes from Surgical Procedures

Number of patients with a Post-Surgical wound infection within 30 days following a surgical encounter.	2
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